

9/7/58

DIALOG(R) File 155:MEDLINE(R)

(c) format only 2003 The Dialog Corp. All rts. reserv.

06821578 91061527 PMID: 2246945

Chlamydial infections.

Martin D H

Section of Infectious Diseases, Louisiana State University School of Medicine, New Orleans.

Medical clinics of North America (UNITED STATES) Nov 1990, 74 (6) p1367-87, ISSN 0025-7125 Journal Code: 2985236R

Document type: Journal Article; Review; Review, Tutorial

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

Chlamydia trachomatis is a unique intracellular parasite that causes a number of common sexually transmitted disease syndromes, including nongonococcal urethritis in both men and women, epididymitis in men, and pelvic inflammatory disease in women. Infants exposed at delivery are at risk for the development of conjunctivitis and pneumonia. There is strong evidence that Chlamydia is a cause of obstructive infertility and ectopic pregnancy in women. It appears that these complications result from the chronic inflammatory response and secondary scarring that are elicited by long-term asymptomatic or nearly asymptomatic fallopian tube infections. Because treatment with tetracycline, doxycycline, or erythromycin is simple, effective, and inexpensive, major efforts should be put into identifying asymptomatic young women through screening of the subpopulations at highest risk. These include sexually active adolescent women and older women who are not monogamous. Blacks are at higher risk than other ethnic groups for infection. The cost of diagnosing chlamydial infection has decreased with the introduction of new nonculture diagnostic tests. This should increase the availability of testing for screening purposes. It is critical to remember that male sex partners of infected women must be treated; otherwise all efforts to prevent long-term complications by identifying and treating asymptomatic women are doomed to failure. (110 Refs.)

Record Date Created: 19910109

Record Date Completed: 19910109

?